| TR  | renwork Reduction Act of 1995.  RANSMITTAL FORM  ell correspondence efter initial f Pages in This Submission                           |          | U.S. Ps are required to respond to a coll Application Number Filing Date First Named Inventor Art Unit Examiner Name Attorney Docket Number  | 09/619  July 19 | 9, 2000 H. Sciupac et al.  | 1876 |
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| Amendm  A A  Extension  Express  Information  Certified Document  Reply to Incomple | Fee Attached  After Final  Affidavits/declaration(s)  asion of Time Request ass Abandonment Request anation Disclosure Statement  Rema |          | Drawing(s)  Licensing-related Papers  Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer  Request for Refund  CD, Number of CD(s)  Landscape Table on CD |                 | After Allowance Communication to TC  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please Identify below):  Return Post Card |      |
|   | SIGNA  | TURE C   | F APPLICANT, ATTOR   | RNEY, C         | DR AGENT   |      |
| Firm Name   | Law Offices of Schr  | neck & S | Schneck  |                 |  |      |
| Signature Printed name  | Thomas Schneck   |          | Alhnei (   |                 |  |      |

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Reg. No.

24,518

Date

October 11, 2005

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| A Pogistration No.   | San auranan in in   | Complete if Known  |                       |                 |                            |              |                   |              |               |             |  |  |
|--|---|--|-----------------------|-----------------|----------------------------|--------------|-------------------|--------------|---------------|-------------|--|--|
| FOR FY 2005    Applicant claims small entity status. See 37 CFR 1.27-  CTAL AMOUNT OF PAYMENT (\$) 0.00   Attorney Docket No. DTC 00-03  |   | Application Number 09/619,   |                       |                 | 028                        |              |                   |              |               |             |  |  |
| Applicant daims small entity status. See 37 CFR 1.27.   Art Unit   2876  |   | Filing Date J  |                       | July 19,        | July 19, 2000              |              |                   |              |               |             |  |  |
| An Unit  | 1   | First Named  | ned Inventor Louis H  |                 | l. Sciupac et al.          |              |                   |              |               |             |  |  |
| METHOD OF PAYMENT (check all that apply)   | <u> </u>  |  |                       |                 |                            |              | T.M. Le           |              |               |             |  |  |
| METHOD OF PAYMENT (check all that apply)  □ Check □ Credit Card □ Money Order □ None □ Other (please identify): □ Deposit Account Deposit Account, the Director is hereby authorized to: (check all that apply) □ Charge fee(s) indicated below □ Charge fee(s) indicated below, except for the filing fee □ Charge any additional fee(s) or underpayments of fee(s) □ Credit any overpayments WARNING: Indicated below □ Charge fee(s) indicated below, except for the filing fee □ Charge any additional fee(s) or underpayments of fee(s) □ Credit any overpayments WARNING: Indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Credit any overpayments   | Applicant da  | ims small entity s   | tatus. See 37 Ci      | -R 1.27         | Art Unit 287               |              |                   | 6            |               |             |  |  |
| Check  | TOTAL AMOUNT  | OF PAYMENT   | (\$) 0.00             |                 | Attorney Docket No. DTC 00 |              |                   | 0-03         |               |             |  |  |
| Deposit Account   Deposit Account Number: 19-0590   Deposit Account Name: Schneck & Schneck  | METHOD OF P   | METHOD OF PAYMENT (check all that apply)   |                       |                 |                            |              |                   |              |               |             |  |  |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) Indicated below  | Check   |  |                       |                 |                            |              |                   |              |               |             |  |  |
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| Charge any additional fee(s) or underpayments of fee(s)  Variable and 1.72  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES SEARCH FEES Small Entity Sma   | For the abo   | ove-identified dep   | osit account, the     | Director is her | reby authorized            | to: (check   | all that app      | oly)         |               |             |  |  |
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| NARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card Information and authorization on PTO-2038.    FEE CALCULATION  |   |  |                       | ayments of fe   | e(s) 🗸 Cre                 | edit any ove | erpayments        | <b>;</b>     |               |             |  |  |
| The specification   Service   Serv   | WARNING: Informat   | under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card |                       |                 |                            |              |                   |              |               |             |  |  |
| Second   Filling FEES   Small Entity   Fee (\$)   Fee ( | FEE CALCULA   | TION   |                       |                 |                            |              |                   |              |               |             |  |  |
| Application Type   | 1. BASIC FILIN  |  |                       |                 |                            |              |                   |              |               |             |  |  |
| Application Type   |   | FILI   |                       | SEAR            |                            |              |                   |              |               |             |  |  |
| Design   200   100   100   50   130   65   | Application T   | vpe Fee  |                       | Fee (\$         |                            |              |                   |              | Fees Pa       | id (\$)     |  |  |
| Plant   200   100   300   150   160   80   | Utility   | 300  | 150                   | 500             | 250                        | 200          | 100               | )            |               |             |  |  |
| Reissue 300 150 500 250 600 300  Provisional 200 100 0 0 0 0 0 0  2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25  Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20  HP = highest number of independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$) Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)   | Design  | 200  | 100                   | 100             | 50                         | 130          | 6:                | 5 .          |               |             |  |  |
| Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0  | Plant   | 200  | 100                   | 300             | 150                        | 160          | 8(                | )            |               |             |  |  |
| 2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  50 25  Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  APP = highest number of total claims paid for, if greater than 20  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  APP = highest number of independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee Paid (\$)  | Reissue   | 300  | 150                   | 500             | 250                        | 600          | 300               |              |               |             |  |  |
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent  Each independent claims  Multiple dependent claims  Substituting the properties of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof fee (no small entity) discount)  Other:  SUBMITTED BY  Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee Paid (\$)  Multiple Dependent Claims  360 180  Multiple Dependent Claims  400 180  Multiple Dependent Claims  Fee (\$) Fee Paid (\$)  Fee (\$) Fee Paid (\$)  Fee (\$) Fee Paid (\$)    | Provisional   | 200  | 100                   | 0               | 0                          | 0            | ) (               | ) ·          |               |             |  |  |
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 3  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  (round up to a whole number)  Fee Paid (\$)   |   | AIM FEES   |                       |                 |                            |              |                   |              |               |             |  |  |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 360 180  Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims 41 -41 or HP = 0 x 0.00 Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20 Extra Claims Fee (\$) Fee Paid (\$)  3 3 or HP = 0 x 0.00 = 0.00  HP = highest number of independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  -100 = /50 = (round up to a whole number) x = 4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other:  |   | 20 on for Boins  | uss saab alsim        |                 | l mara than in             | . tha asiai  | mal matant        | •            |               |             |  |  |
| Multiple dependent claims  Total Claims  41  |   |  |                       |                 |                            |              |                   |              |               |             |  |  |
| Total Claims  41   -41   |   |  | , 101 10155005        | , caon macp     |                            | o.oa.        |                   | .g.na. paton |               |             |  |  |
| HP = highest number of total claims paid for, if greater than 20  Indep. Claims  Substitute  | Total Claims  | Extra C  |                       |                 |                            | Multin       | le Depend         | lent Claims  |               |             |  |  |
| Indep. Claims  3   |   |  |                       |                 | 0                          | <u>Fe</u>    | <del>)</del> (\$) | Fee Pald     | <u>(\$)</u>   |             |  |  |
| 33 or HP = 0x0.00 = _0.00  HP = highest number of independent dalms paid for, if greater than 3  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  |   | <u>-</u>   | -                     |                 | Paid (\$)                  |              |                   |              |               | i           |  |  |
| 3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets   | $3 - 3$ or HP = $0 \times 0.00 = 0.00$  |  |                       |                 |                            |              |                   |              |               |             |  |  |
| If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  | •   |  | aims paid for, if gre | ater than 3     |                            |              |                   |              |               |             |  |  |
| for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 = /50 = (round up to a whole number) x =   4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other:   |   |  |                       |                 |                            |              |                   |              |               |             |  |  |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  -100 = /50 = (round up to a whole number) x =  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other:   |   |  |                       |                 |                            |              |                   |              |               |             |  |  |
| 4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other:   | Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) |  |                       |                 |                            |              |                   |              |               |             |  |  |
| Non-English Specification, \$130 fee (no small entity discount)  Other:  |   | 100 = / 50 = (round up to a whole number) x =  |                       |                 |                            |              |                   |              |               |             |  |  |
| Other:   | •   | •  |                       |                 |                            |              |                   |              | Fees          | s Paid (\$) |  |  |
| SUBMITTED BY   | Non-English Specification, \$130 fee (no small entity discount)                                   |  |                       |                 |                            |              |                   |              |               |             |  |  |
|  | Other:  |  |                       |                 |                            |              |                   |              |               |             |  |  |
|  | SUBMITTED BY  |  |                       |                 |                            |              |                   |              |               |             |  |  |
| 1 International Control of the Contr   | Signature   | Athan  | ~ w 525               | cline A         | Registration No            | 24,518       |                   | Telephone (  | 408) 297-     | 9733        |  |  |
| Name (Print/Type) Thomas Schneck Date October 11, 2005   | Name (Print/Type)   |  |                       |                 |                            |              |                   |              |               |             |  |  |

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